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TRANSMITTAL
FORM

Application Serial Number	09/819,883
Filing Date	March 28, 2001
First Named Inventor	Long
Group Art Unit	2113
Examiner Name	Manoskey, J.
Attorney Docket No.	SRT-022

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Technology Center 2100

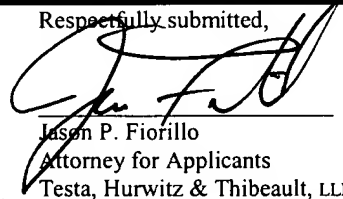
ENCLOSURES (check all that apply)

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|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.)
<input checked="" type="checkbox"/> Check Attached (\$110.00)
<input type="checkbox"/> Copy of Fee Transmittal Form | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] | <input type="checkbox"/> Formal Drawing(s) | <input type="checkbox"/> Appeal Brief (in triplicate) |
| <input checked="" type="checkbox"/> Petition for Extension of One-Month Time (1 pg.) | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal | <input type="checkbox"/> Status Inquiry |
| <input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Form PTO-1449
<input type="checkbox"/> Copies of IDS Citations | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) | <input checked="" type="checkbox"/> Return Receipt Postcard |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application | <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 |
| | <input type="checkbox"/> Small Entity Statement | <input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| | <input type="checkbox"/> CD(s) for large table or computer program | |
| | <input type="checkbox"/> Amendment After Allowance | |
| | <input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | |

CORRESPONDENCE ADDRESS

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SIGNATURE BLOCK

Respectfully submitted,

Date: November 10, 2004
Reg. No. 52,892
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Jason P. Fiorillo
Attorney for Applicants
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125 High Street
Boston, MA 02110



FEES TRANSMITTAL
FY 2005

Complete if Known	
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METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																					
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check (\$110.00) <input type="checkbox"/> Money Order <input type="checkbox"/> Other	3. ADDITIONAL FEES <table style="width:100%;"> <tr> <th style="width:15%;">Large Entity Fee (\$)</th><th style="width:15%;">Small Entity Fee (\$)</th><th style="width:45%;">Fee Description</th><th style="width:25%;">Fee Paid</th></tr> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td>\$110.00</td></tr> <tr><td>430</td><td>215</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>980</td><td>490</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1530</td><td>765</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2080</td><td>1040</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>340</td><td>170</td><td>Notice of Appeal</td><td></td></tr> <tr><td>340</td><td>170</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>340</td><td>170</td><td>Request for oral hearing</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>790</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>790</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>110</td><td>55</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> <tr><td colspan="2">Other fee (Specify)</td><td></td><td></td></tr> </table>	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month	\$110.00	430	215	Extension for reply within second month		980	490	Extension for reply within third month		1530	765	Extension for reply within fourth month		2080	1040	Extension for reply within fifth month		340	170	Notice of Appeal		340	170	Filing a brief in support of an appeal		340	170	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		110	55	Submission of Terminal Disclaimer		Other fee (Specify)				Other fee (Specify)				
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.																																																																																						
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CORRESPONDENCE ADDRESS Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	SIGNATURE BLOCK Respectfully submitted, Jason P. Fiorillo Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Date: November 10, 2004 Reg. No.: 52,892 Tel. No.: (617) 310-8471 Fax No.: (617) 248-7100																																																																																					